

1115

PLACE OF BIRTH

County of Graham BUREAU OF VITAL STATISTICS State Index No. 1283
District of Prima ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 189
Town of Central Local Registrar's No. 189
or
City of _____ (No. _____ NAME ADDED BY SUPPLEMENT St. _____ Ward _____)

FULL NAME OF CHILD Orin Dodge { Born } Yes
If child is not named, make Supplemental Report on blank obtainable from local Registrar. { Alive } NO

Sex of Child <u>male</u>	Twin, Triplet or other <u>no</u>	and	Number in order of birth <u>10</u>	Legitimate? <u>yes</u>	Date of Birth <u>June 23</u> 192 <u>1</u> (Month) (Day) (Yr.)
FATHER			MOTHER		
Full Name <u>D. G. Dodge</u>			Full Maiden Name <u>Alice Alfred</u>		
Residence <u>Central, Ariz.</u>			Residence <u>Central, Ariz.</u>		
Color or Race <u>white</u> Age at last Birthday <u>34</u> (Years)			Color or Race <u>white</u> Age at last Birthday <u>28</u> (Years)		
Birthplace <u>Arizona</u>			Birthplace <u>Idaho</u>		
Occupation <u>farmer</u>			Occupation <u>housewife</u>		

Number of child of this mother 10 Number of children, of this mother, now living 10 Were precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on 6-23 1921, at 11 P.M.

*When there is no attending physician or midwife, then the householder should make this return.

(Signature) J. H. Morris
(Attending physician, midwife, householder*)

Given or Christian name added from a supplemental report _____ 192 _____

Address Prima, Ariz.

645-623-114
COUNTY REGISTRAR.

Filed 7-5 1921

Alma Burns
LOCAL REGISTRAR.

Filed 7-10 1921 A True Copy

J. E. Stratton
COUNTY REGISTRAR.